## New Hampshire State Council on the Arts NH CARES Artist-Led Project Grants Budget Form

Maximum	grant red	uest is	\$6.000

No match is required.

Your budget must be balanced - total project income must equal total project expenses.

oject Income - List all funding sources for this project, both secured and anticipated. equested NHSCA Grant Support	Amount Cash	Amount In-Kind	Secured	Total Income	Notes
ncessions					
es and/or tuition					
emberships					
rporate contributions (Identify below. If you have no private foundation cash or in-kind, please put zeros in the blue cells.)					
ivate foundations (Identify below. If you have no private foundation cash or in-kind, please put zeros in the blue cells.)					
rent-Teacher Organization					
deral Government					
on-NHSCA State Government					
cal Government					
pplicant cash (please click for definitions)					
ther revenue (Identify below. If you have no other revenue cash or in-kind, please put zeros in the blue cells.)					
atal Project Income					
ease use this space for additional budget notes not included above.					

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Project Expense - List all expense items related to your application.	Amount Covered by NHSCA Grant (may not exceed total requested grant support)	Amount NOT covered by NHSCA Grant	Amount In-Kind	Total Expense	Notes			
Administrative staff								
Artistic fees (NOT NHSCA Roster artists)								
Arts specialist(s)								
Technical fees								
Teachers								
NHSCA Roster artist fees								
Advertising								
Printing								
Mailing/postage								
Space rental								
Travel								
Accessibility expenses (Please specify below. If you have no expenses related to Assessibility, please put zeros in the blue cells.)								
A - B A - managed because advances and a second because the second because and a second because and a second because and a second because and a second because a second b								
				1				
Supplies, materials and miscellaneous expenses								
Other (Identify below. If you have no additional expenses, please put zeros in the blue cells.)								
Other fluentity below. If you have no adultional expenses, please put zeros in the blue cens.)								
The Device France								
Total Project Expense								
Please use this space for additional budget notes not included above.								
Frequently Asked Questions								
What is in-kind and how do we account for it?  In-kind contributions include any non-cash support your project receives. Panelists want to know what kind of non-monetary support you receive. Volunteer time should be included in in-kind services and should be accounted for at miminum wage except for professional services (such as lawyers and accountants performing legal and accounting services) which can be counted at the professional's going rate. Materials and supplies such as waived rent and utilities should be included in in-kind goods estimating the value your organization would otherwise need to pay.	What should I include in my budget? This budget is for a PROJECT. Please include only those items of income and expense relevant to the specific project for which you are requesting funding, or for the portion of the larger project for which you are requesting support. Estimate as best you can the percentage of earned income, salaries, office supplies, etc. for this specific art project.							
What is applicant cash?  Applicant cash refers to the money that comes from you or a partner organization's general operating budget or reserves.	Should income and expenses match?  Projected budgets should balance while actuals probably won't. Projected budgets balance because you are providing a picture of what you think you will spend and where that funding will come from.							
Keep a copy of this budget in your records! When you fill out your final report, you will be asked to update this budget sheet with actual numbers and resubmit it.								

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